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INFORM	ATION DISCLOSURE	Filing Date	Herewith			
		First Named Inventor	Robert Kasten			
(Use as many sheets as necessary)		Art Unit				
		Examiner Name				
eet 1	of 1	Attorney Docket Number	Kasten 032690.02			

Examiner Initials*	Cite No.1	Document Number Number-Kind Code ² (Flower)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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